Improving Health Care Access for Immigrants in NYC

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Mayor’s Task Force on Immigrant Health Care Access

• Formed in 2014 to address disparities in health care access for the immigrant community in NYC
• City officials co-chaired the Task Force
• Developed recommendations to improve coordinated and robust access to care for the uninsured, particularly the unauthorized
The Problem: Non-citizen and unauthorized residents have very low coverage rates

Health Insurance Coverage in New York City, 2013

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<tbody>
<tr>
<td>Insured 86.5%</td>
<td>Uninsured 13.5%</td>
<td>Insured 64.9%</td>
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Data Source:
U.S. Bureau of the Census, American Community Survey, Public Use Microdata Sample 2013

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U.S. Census Bureau, American Community Survey Public Use Microdata Sample 2013, as augmented by Poverty Research Unit, NYC Center for Economic Opportunity
Mayor’s Task Force included City and Partners

Care & Coverage Options for the Uninsured (Chair: DOHMH)

- Assess existing healthcare safety net options for NYC’s unauthorized and uninsured immigrants, and review existing programs in other jurisdictions for providing healthcare to similar populations
- Members included: HHC, CHCANYS, CSS, GNYHA, NYIC, The Hastings Center

General Barriers to Healthcare for Immigrants (Chair: HRA)

- Assess existing cultural and general barriers to healthcare access for immigrant populations in NYC
- Members included: HHC, CHCANYS, MSK Immigrant Health & Cancer Disparities Service, Hispanic Federation

Language Barriers to Healthcare for Immigrants (Chair: MOIA)

- Assess existing language barriers to healthcare access for immigrant populations in NYC
- Members included: ACS, Legal Aid, Make the Road, MSK Immigrant Health & Cancer Disparities Service, NYLPI, Grameen PrimaCare, NYLAG
We identified specific barriers to access and care and recommended solutions

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<tr>
<th>Assessment findings</th>
<th>Recommendations</th>
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<td>1. Healthcare services are expensive, and difficult for immigrants to afford.</td>
<td>1. Create a <strong>direct access health care program</strong> to provide uninsured immigrants and others with access to coordinated primary and preventive health care services.</td>
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<td>2. Providers in the City often have limited / inadequate cultural and linguistic competency, which compromises their ability to serve immigrants.</td>
<td>2. Expand the capacity of the <strong>New York City health care system</strong> to provide culturally and linguistically competent primary and preventive health care services to immigrants.</td>
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<td>3. Across New York City, and in high-density immigrant neighborhoods in particular, there is limited provider capacity and service delivery.</td>
<td>3. Conduct <strong>public education and outreach on health care and coverage options</strong> for immigrants and the organizations that serve them.</td>
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<td>4. Immigrants have a particularly difficult time navigating the healthcare system and understanding their care and coverage options.</td>
<td>4. Increase access to high quality <strong>interpretation services</strong> at all New York City healthcare providers.</td>
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<td>5. Immigrants lack sufficient access to high-quality interpretation services, and providers often do not know where and how to access language services as well.</td>
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<td>6. Immigrants also often do not know their legal rights to language access and may not press for mandated translation assistance accordingly.</td>
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CONTACT: pressoffice@cityhall.nyc.gov, (212) 788-2958

MAYOR DE BLASIO ANNOUNCES PLAN TO IMPROVE IMMIGRANT ACCESS TO HEALTH CARE SERVICES

Plan follows recommendations by the Mayor’s Task Force on Immigrant Health Care Access

New program aims to expand access to health care beyond the Affordable Care Act

NEW YORK—Mayor Bill de Blasio announced a plan to improve health care access for the city’s immigrant population, making New York City one of the first major U.S. municipalities to expand health care access after the enactment of the Affordable Care Act. The plan includes the new “Direct Access” health initiative to provide reliable and coordinated access to affordable care for immigrants who are excluded from federal and state support. The plan also includes recommendations from the Mayor’s Task Force on Immigrant Health Care Access for a set of programs to expand public education about affordable health care options, support health care providers serving immigrant patients, and improve medical interpretation services.
Health Access for Unauthorized New Yorkers

• The pilot health care program is for populations without access to care post-health reform

• The program will include the following:
  o Network of health facilities including community health centers and public hospitals
  o Patient membership card
  o Predictable costs
  o Encouraged use of preventive and primary care services
  o Care coordination and customer service
Direct Access model has advantages over today’s system for the uninsured

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<tr>
<th>Enrollment</th>
<th>Primary care</th>
<th>Care coordination</th>
<th>Inpatient and Specialty care</th>
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<td>No formal access programs</td>
<td>Patients use a range of hospital and community clinics. No sharing of patient records. Different fee scales.</td>
<td>No care coordination beyond what is offered in individual clinics or health center networks</td>
<td>Patients use multiple locations. No sharing of patient records. Different fee scales.</td>
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Direct Access enrollee

- Enrollment process tied to other City programs, e.g., municipal ID card
- Assigned primary care home with consistent fees across the entire network
- Remote care coordination supports patient in accessing appropriate care in timely fashion
- Coordinated access to specialty services through the public hospital system. Sharing of patient records.
Program Design

**Location and network:** 1-2 neighborhoods including public hospitals and nearby Community Health Centers

**Target population:**
- Age 19 and up
- At or below 200% FPL

**Outreach:**
- Email & mailing to all IDNYC holders in target neighborhoods
- IDNYC and other events

**Enrollment process and card:**
- CACs screen applicants
- IDNYC is program card

**Care coordination:**
- Assigned to primary care home
- Use of web-based care management platform

**Service design:** Enrollees will have access to a defined set of healthcare services with a single fee schedule across the network

**Bundled payments to providers**